

PART B - FEE(S) TRANSMITTAL

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APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR			(Date)
10/801,583	. 03/17/2004	1	Thomas Sheng		ATTORNEY DOCKET NO.	CONFIRMATION NO.
TITLE OF INVENTION: S	HEET-FED SCANN	ING DEVICE CAPABL		CUMENT EDGE	3722-0183PUST	2753
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	FEE TOTAL FEE(S) DU	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0 12/1	1/2007 NNGUYEN2 00	01/14/2008 1000079 10801583
EXAMINER		ART UNIT	CLASS-SUBCLASS		C: 1501	1440.90 (
LEE, CHEUKFAN 2625 1. Change of correspondence address or indication of "Fee Address		2625	358-498000	A2 F	C:1594	309.00
CFR y.363). If Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. If "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the p (1) the names of up to or agents OR, alternati (2) the name of a single registered attorney or a registered patent attorney or listed, no name will be	o 3 registered paten vely, le firm (having as a agent) and the nam- imeys or agents. If	t attorneys 1	
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Avision	n Inc.	•	Taiwan			v
Please check the appropriate	assignee category or	categories (will not be p	rinted on the patent):	Individual OCo	rporation or other private gr	oup entity Government
4a. The following foc(s) are: 12 Issue Fee 12 Publication Fee (No si 13 Advance Order - # of	mail entity discount po		b. Payment of Pec(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).			
5. Change in Entity Status	•	•				• • • • • • • • • • • • • • • • • • • •
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This collection of information is required by 37 CFR 1.31.1. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.						